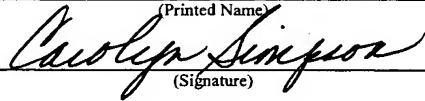




Atty. Dkt. No. 037607-0236

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: William R. Nolan III
Title: SYSTEM AND METHOD FOR
PROCESSING DATA
PERTAINING TO FINANCIAL
ASSETS
Appl. No.: 10/738,468
Filing Date: 12/17/2003
Examiner: TBD
Art Unit: 3621

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EV 625662412 US	3/31/06
(Express Mail Label Number)	(Date of Deposit)
Carolyn Simpson	
(Printed Name)	
	
(Signature)	

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended				Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	44	-	32	=	12	x	\$50.00	=			\$600.00
Independent Claims:	7	-	5	=	2	x	\$200.00	=			\$400.00
First presentation of any Multiple Dependent Claims:										+	\$360.00 = \$0.00
CLAIMS FEE TOTAL										=	\$1000.00

☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$120.00	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$450.00	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$0.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$1000.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$1000.00

A credit card payment form in the amount of \$1000.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 3/31/06

By Michael S. Brayer

FOLEY & LARDNER LLP
Customer Number: 34099
Telephone: (414) 297-5684
Facsimile: (414) 297-4900

Michael S. Brayer
Attorney for Applicant
Registration No. 51,495



04-03-06

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Carolyn Simpson	
(Printed Name)	
	
(Signature)	

PRELIMINARY AMENDMENT UNDER 37 CFR 1.115

Prior to examination of the present Application, Applicant respectfully requests that the application be amended as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 12 of this document.

Please amend the application as follows:

04/05/2006 RFEKADU1 00000015 10738468

01 FC:1201 400.00 OP
02 FC:1202 600.00 OP